

# Indiana State Police Clandestine Laboratory Occurrence Report

This form complies with the statutory requirement set forth in IC 5-2-15-3.

Date: 9-11-13

Address: 3804 S US 231 Apt 3

Incident #: 13ISPC009069 *AL*

Greencastle IN

County: Putnam

46135

## Type of Laboratory Seizure (check one)

- ☒ Operational Lab  
☐ Chemical/Glassware/Equipment (only)  
☐ Dumpsite (only)

## Seizure Location (check all that apply)

- ☒ Residence ☐ Hotel/Motel  
☐ Outbuilding ☐ Open No Structure  
☐ Vehicle ☐ Other: \_\_\_\_\_

## Items Found: Location (bedroom, kitchen, open air, etc)

(check all that apply)

- ☒ One Pot or Birch Reaction(s): Bedroom  
☐ Red Phosphorous/Iodine Reaction(s): \_\_\_\_\_  
☐ Hydrochloric Acid Gas Generator(s): \_\_\_\_\_  
☐ Flammable Solvents: \_\_\_\_\_  
☐ Water Reactive Metal (Lithium): \_\_\_\_\_  
☐ Anhydrous Ammonia: \_\_\_\_\_  
☒ Corrosive Acid: Bedroom  
☒ Corrosive Base: Bedroom  
☐ Other (item and location): \_\_\_\_\_

## Vehicle Information:

Owner:

Make:

VIN:

Model:

Year:

## Child under age 18 discovered (check appropriate)

- ☐ Yes \_\_\_\_\_ (number present)  
☐ No  
☒ Children not present but evidence they reside or visit often

Living conditions of home: ☐ clean ☐ disarray

☒ unclean

Estimated length of time manufacturing had been occurring: 3 months

Additional Information: \_\_\_\_\_

## This report has been faxed\* or emailed to the following agencies that serve the location:

Fire Department City, Township or County Greencastle Fire

Fax:

Health Department County: Putnam County

Fax: 765-658-2782

Department of Child Services Hotline: deshotlinereports@dcs.in.gov Fax: 317-234-7595 or 317-234-7596

For further information regarding this methamphetamine laboratory, contact

Investigating Officer: Adam Edwards

Phone 765-653-4114

\*This form is to be faxed to the Fire Department, Health Department and/or Department of Child Services listed within 24 hours of scene processing.